CAMPAIGN TREASURER'S REPORT SUMMARY					
(1) John George Beckford  Name  (2) 3414 Heatrox Toxace Address (number and street)  Lavorchulu FL 33319  City, State, Zip Code  Check here if address has changed  (3) ID Number:  (4) Check appropriate box(es):  Candidate Office Sought: Lavorchulu City Commissioner (PC)  Electioneering Communications Org. (ECO)  Party Executive Committee (PTY)  Independent Expenditure (IE) (also covers an individual making electioneering communications)					
	Identifiers  09 / 30 / 17 Report Type: 2017- M9  cial Election Report				
(6) Contributions This Report	(7) Expenditures This Report				
Cash & Checks \$,, 350 · 60	Monetary Expenditures \$,,2 ,				
Loans \$,,	Transfers to				
Total Monetary \$,, 350. 60	Office Account       \$				
	(8) Other Distributions \$ ,				
(9) TOTAL Monetary Contributions To Date \$, 2,305.00	(10) TOTAL Monetary Expenditures To Date \$, 320.45				
(11) Certification It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)					
/ I certify that I have examined this report and it is true, corre	·				
(Type name) Toth Gobbs Beckfold Individual (only for IE or electioneering comm.)  X  Signature	(Type name) TOHN GEDISE BECKFORD  Candidate Chairperson (only for PC and PTY)  X  Signature				

## CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name JOHN G. BECKFORD (2) I.D. Number							<del></del>	
(3) Cover Period 09 / 01 / 17 through 09 / 30 / 17 (4) Page of								
(5) Date	(7) Fuil Name		(8)	(9)	(10)	(11)	(12)	
(6)	(Last, Suffix, First, Middle)	.	N 4 . M					
Sequence Number	Street Address & City, State, Zip Code	Туре	Contributor Occupation	Contribution Type	In-kind Description	Amendment	Amount	
09,25,17	0	I	Executive				\$250.00	
09,25,17	STEVE BOYAR 723 NE 17 THE FT. LAUD 33304	I	EXECUTIVE	CHE	_	-	\$100.00	
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DS-DE 13 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name JOHN GEORGE BECKFORD	(2) I.D. Number
(3) Cover Period <u>69 / 61 / 7</u> through <u>69 / 30 / 17</u>	(4) Page of

(5) Date	(7) Full Name	(8)	(9)	(10)	(11)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
09/29/17 1	TD BANK 1701 ROUTE 70 EAST CHERRY HILL NJ 08634	BANK PAPOR STATEMENT PEE	CAN		1.00
08/31/17	TD BANK 1701 ROUTE 70 EAST CHORRY WILL NJ 08034	Bank Statement Fee	CAN	ADD	1.00
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